

MAR 07 2007

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**SCULLY, SCOTT, MURPHY
& PRESSER, P.C.**

Fax

To:	Examiner Derek J. Rosenau	From:	John F. Vodopia
Fax:	(571) 273-8300	Pages:	17 pages including cover sheet
Phone:		Date:	3/7/2007
Re:	U.S. Serial No: 10/737,277 Group Art Unit: 2834 Confirmation No: 6160 Docket No: 17317	CC:	

AMENDMENT UNDER 37 C.F.R. §1.111

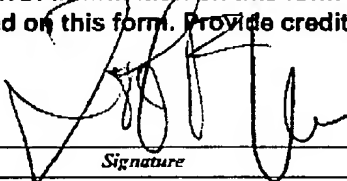
• Attached hereto:

1. Certificate of Transmission by Facsimile
2. Amendment Transmittal Letter (in duplicate)
3. Amendment Under 37 C.F.R. §1.111
4. Replacement Drawing Sheet
5. Authorization to charge deposit account

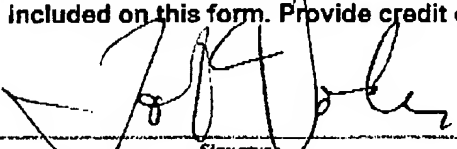
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AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17317									
Applicant(s): Omura Mayayoshi, et al.														
Application No. 10/737,277	Filing Date December 16, 2003	Examiner Derek J. Rosenau	Customer No. 23389	Group Art Unit 2834	Confirmation No. 6160									
Invention: ULTRASONIC PROBE														
COMMISSIONER FOR PATENTS:														
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.														
CLAIMS AS AMENDED														
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE									
TOTAL CLAIMS	8 -	20 =	0	x \$50.00	\$0.00									
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00									
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00									
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00									
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.														
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.														
 Signature			Dated: March 7, 2007											
John F. Vodopila Registration No. 36,299 SCULLY, SCOTT, MURPHY & PRESSER, P.C. 400 Garden City Plaza, Suite 300 Garden City, New York 11530 (516) 742-4343			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</td> </tr> <tr> <td colspan="2" style="text-align: center;">(Date)</td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ Signature of Person Mailing Correspondence</td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____		(Date)		_____ Signature of Person Mailing Correspondence		_____ Typed or Printed Name of Person Mailing Correspondence	
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Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00									
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